

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / PUBLIC HEALTH SERVICE PHEALTH AGENCIES AND MENTAL HEALTH ADMINISTRATION

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SURVEILLANCE SUMMARY MALARIA — United States and Puerto Rica 1968

A total of 2.610 cases of malaria with onset of illness in 1968 in the United States or Puerto Rico were reported to the Parasitic Diseases Branch, NCDC. This compares with 2,855 cases reported in 1967. Military personnel, including recently discharged veterans, accounted for 2.487 cases and civilians for the remaining 123. The number of military cases in 1968 was slightly less than in 1967 but considerably in excess of the annual totals for 1959 through 1966; the number of civilian cases was similar to totals for the past 5 years (Figure 1). Of the 2,610 cases, 2,598 were imported*, while 12 were acquired in the United States; five of the 12 were classified as introduced and seven as induced. Cases were reported from all 50 states and Puerto Rico, but California, Colorado, Georgia, Kentucky, North Carolina, and Texas accounted for 53

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Surgal Lance Summary 9601 Puero Rico Evdemologic Notes and Reports dudwark of Salmonellosis - Lightsiana .	
Che of Anthrax - New Jersey	212

percent of the total, reflecting the location within these states of military bases receiving large numbers of Vietnam returnees.

The *Plasmodium* species were identified in 2.555 of the 2,610 cases (97.9 percent). *P. vivax* accounted for 81.4 percent of the infections (2,125 cases), while *P. falciparum* was diagnosed in 13.2 percent (344 cases): these percentages are identical to those reported in 1967.

(Continued on page 206)

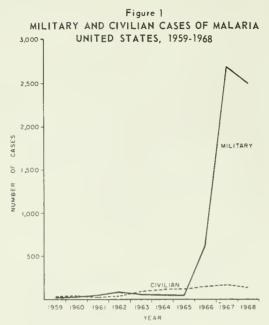
TABLE I. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES (Cumulative tatals include revised and delayed reparts through previous weeks)

	24th WEE	K ENDED	MEDIAN CUMULATIVE, FIRST 24 WE				
DISEASE	June 14, 1969	June 15, 1968	1964 - 1968	1969	1968	MEDIAN 1964 - 1968	
Aseptic meningitis	46	67	41	668	755	693	
Diphtheria.		4	6	64	70	110	
Encephalitis, primary:	1	_	1	67	84	79	
Arthropod-borne & unspecified	14	19	27	453	398		
Encephalitis, post-infectious	8	8	16		1	600	
Hepatitis, serum	133	90	10	140	256	414	
Hepatitis, infectious		789	646	2,423	1,854	19.374	
Malaria		42	5	21,910	20,163		
Measles (rubeola)	757	671	_	1,201	971	133	
Meningococcal infections, total	48	45	4,472 46	16,642	16,483	172,735	
Civilian	47	40	40	1,925	1,551	1,551	
Military		5		1,740	1,400		
Mumps		3,001			151		
Poliomyelitis, total	1	1	,	58,206	112,005		
Paralytic	î	1	1 1	2	23	18	
Rubella (German measles)	1.897	I.644		41.364	37.756	16	
Streptococcal sore throat & scarlet fever		6.325	6.350	248.183		046.016	
Tetanus		3	8	52	246,215	246,215	
Tularemia	8	4	4	68	58 82	81	
Typhoid fever	5	11	9	127	127	82	
Typhus, tick-borne (Rky, Mt. spotted fever).	27	8	10	120	63	160	
Rabies in animals	62	46	94	1.758	1.772	55 2.151	

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax: Botulism: Leptospirosis: Plague: Psittacosis: Conn1	10 29 —	Rabies in man: Rubella congenital syndrome: Trichinosis: Md1, R.I6 Typhus, murine: Ohio-1	5

MALARIA - (Continued from front page)



P. malariae accounted for 1.2 percent (32 cases) in 1968 while 0.3 percent (8 cases) were due to P. ovale. Mixed infections, generally due to P. vivax and P. falciparum, accounted for 1.8 percent (46 cases) in 1968. The species was undetermined for 2.1 percent (55 cases) of infections.

U.S. citizens accounted for 81 of the 123 civilian cases and foreign visitors for the remaining 42 cases. College students or teachers accounted for more civilian cases than any other occupational group (40 cases), followed by merchant seamen (14 cases). Only six cases were reported in Peace Corps Volunteers.

The onset of illness occurred more than 30 days after arrival in the United States in 74 percent of the 2,368 cases for which hoth date of onset and date of arrival in this country were known. As in previous years, a marked difference in time of onset was observed between falciparum and vivax malaria; 69.5 percent of the falciparum cases became ill within 1 month after arrival compared with 19.6 percent of the vivax cases.

There were six malaria fatalities in the United States in 1968, all due to P.falciparum, giving an overall malaria case fatality ratio of 0.23 percent and a falciparum case fatality ratio of 1.74 percent.

During 1968, a total of 247 malaria relapses were reported; 191 relapses were second attacks, 44 were third attacks, 10 were fourth attacks, and two were fifth attacks. Thus, a total of 2,857 malaria attacks (2,610 primary attacks plus 247 relapses) were reported in 1968.

Infections acquired in Vietnam accounted for 2,444 of the 2,598 imported cases (94.1 percent). Only nine of these 2,444 cases were nonmilitary personnel. *P. vivax* was the etiologic agent in 2,016 of the 2,444 cases (82.5 percent). *P. falciparum* in 312 cases (12.8 percent). *P. malariae* in 21 cases (0.8 percent), and mixed Plasmodium species in 44 cases (1.8 percent). No *P. ovale* cases were reported and in 51 cases (2.1 percent) the Plasmodium species was

not identified. Army personnel accounted for 86 percent of the military cases from Vietnam, Marines for 10.2 percent, and Navy and Air Force personnel for less than one percent of the cases.

Of the 2,008 military returnees from Vietnam who developed vivax malaria in the United States in 1968, 103 later suffered a vivax relapse, for a relapse rate of 5.1 percent; the corresponding rate for 1967 was 18.4 percent, and for 1966, 29.8 percent. The relapse rate for falciparum infections in military Vietnam returnees in 1968 was 0.96 percent (three relapses in 312 infections) as compared with 6.5 percent in 1967 and 8.8 percent in 1966. The 1968 relapse rates should be considered preliminary estimates since relapses of 1968 cases will continue to occur in the future.

Of the cases acquired in the United States, the five introduced cases were all caused by P. vivax. Four were epidemiologically related and acquired at a drive-in movie theater in eastern Alabama in late July; the index case was not identified and the vector appeared to be Anopheles quadrimaculatus. The fifth case occurred in a serviceman at Fort Stewart, Georgia, in early August; one suspect index case, a Vietnam returnee, was identified; the vector appeared to be A. crucians. Of the seven induced cases, all had received blood transfusions. Three were due to P. falciparum, three to P. malariae, and one to P. vivax. One of the falciparum cases was fatal. The infective donor was identified in all except one P. malariae case: Three of the donors were Vietnam returnees, two were visitors from West Africa, and one was an immigrant from the Philippines.

(Reported by the Parasitic Diseases Branch, Epidemiology Program, NCDC.)

A copy of the original report from which these data were derived is available on request from

National Communicable Disease Center Attn: Chief, Parasitic Diseases Branch Epidemiology Program Atlanta, Georgia 30333

*Terminology

The terminology used in this report is derived from the recommendations of the World Health Organization. 1,2

- 1. Autochthonous
 - a) Indigenous malaria acquired by mosquito transmission in an area where malaria is a regular occurrence.
 - b) Introduced malaria acquired by mosquito transmission from an imported case in an area where malaria is not a regular occurrence.
- 2. Imported Malaria

Malaria acquired outside of a specific area (United States and Puerto Rico in this report).

3. Induced

Malaria acquired through artificial means, i.e., blood transfusion, common syringes, malariotherapy.

4. Relapsing

Renewal of clinical activity occurring after an interval from the primary attack greater than that due merely to periodicity.

References:

- ¹Terminology of malaria and of Malaria Eradication. World Health Organization, 1963, p. 32.
- ²WHO Expert Committee on Malaria Tenth Report. WHO Technical Report Series No. 272, p. 34.

EPIDEMIOLOGIC NOTES AND REPORTS OUTBREAK OF SALMONELLOSIS - Louisiono

During May and June 1969, an extensive outbreak of salmonellosis due to Salmonella infantis occurred among patients and personnel at a large hospital in Louisiana. Between May 1 and 12, 13 patients and one employee developed gastroenteritis with cultures positive for S. infantis: 11 had fever and diarrhea as initial symptoms. In the 7-month period prior to this time, this organism had been recovered from only four hospitalized patients, the last being on March 2.

To evaluate the extent of infection among patients, a stool culture survey of 214 symptomatic and asymptomatic patients was performed between May 14 and 21. Infection was documented in 54 persons from all areas of the hospital except in the premature nursery where all 44 infants cultured were negative. Thirty percent of the positive patients were asymptomatic; 10 percent had fever without diarrhea. The positive patients had been admitted between January 31 and May 12. They ranged in age from 2 months to 76 years (median 44 years). No common procedures or medications could be implicated in the spread of infection.

Approximately 25 percent of the physicians and nurses from various services in the hospital had also noted gastroenteritis between May 1 and 14. In a culture survey of staff personnel, two of 22 physicians and 12 of 215 nurses were positive for *S. infantis*.

All patients involved in the outbreak were on a regular or low residue diet except those under 1 year of age. In addition, most of the involved physicians regularly ate meals in the hospital; however, this was not the case for many of the nurses involved. Although the patients' food is cooked and served separately from employees' food, the menus are often identical and are prepared in the same kitchen. Of 282 kitchen personnel stool cultured between May 16 and 20, six employees were positive for S. infantis. One of these prepared food for patients and one prepared salads for both patients and staff. In an environmental culture survey of the kitchen areas and a ward pantry conducted on May 19, 20, and June 4, S. infantis was recovered from a wooden block used for cutting cooked meats. Water samples were negative for coliforms and S. infantis. Cultures of chicken, turkey, sausage, frozen egg whites and volks, yeast, flour, ice cream, tube feedings, other foods, and ice obtained from the kitchen are in progress.

To evaluate the continued transmission of infection, a surveillance system for diarrhea among patients was instituted on May 22. Between May 22 and June 3, 66 patients developed diarrhea and were cultured; four were positive for *S. infantis*. The hospital bacteriology laboratory identified four other positive patients. All eight had been admitted prior to May 12. Another culture survey on June 3 and 4 of 136 asymptomatic patients admitted between May 16 and June 1 identified five infected patients (Table 1). Four of the five patients had been in the hospital between May 1 and 12 and had been readmitted. This rapid decline in cases in mid-May suggests that the main

source of infection was no longer present in the hospital and that continued person-to-person transmission was not occurring frequently.

Table | Prevalence of Salmonella infantis, Phage type C₁ in Patients by Date of Admission*, a Hospital, Lauisiana

Date of Admission	Number Cultured	Number Positive	Percent
Prior to May 15	23	7	30
May 15 - May 21**	17	2	- 1
May 22 - May 28**	79	4	5
After May 28	38	0	()
Total	187	13	

^{*}Does not include 15 patients who developed diarrhea after May 21 and had negative cultures.

The sharp clustering and rapid falloff of cases (Figure 2) and the identification of *S. infantis* in the environment of the kitchen suggest a common source outbreak related to the central kitchen. It has not been established whether this source of infection was a single contaminated food item served at several meals or if the kitchen environment became contaminated primarily by a food or a carrier with subsequent secondary contamination of prepared food or if food was contaminated by a foodhandler shown to be a carrier. A common food vehicle could not account for the index cases on pediatric wards, however, because one infant was receiving only commercially prepared formula and the other three were receiving prepared baby food. For these cases, infection could have been transmitted by infected nurses.

Figure 2

SALMONELLOSIS DUE TO S. INFANTIS AMONG
HOSPITAL PATIENTS BY DATE OF ONSET
LOUISIANA - APRIL-MAY 1969

(Reported by Charles T. Caraway, D.V.M., Chief, Section of Epidemiology, Louisiana State Department of Health; and a team from NCDC.)

Editorial Comment:

It has never been shown that a salmonella outbreak of this magnitude could be initiated by one or more stool carriers through person-to-person transmission. Although some of the professional staff could have become infected secondarily, it is more likely that they were exposed to the same common vehicle.

^{**}Five of six positive patients had been in the hospital before May 21 and were readmitted.

Morbidity and Mortality Weekly Report

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

JUNE 14, 1969 AND JUNE 15, 1968 (24th WEEK)

		· · · · · ·		1							
	ASEPTIC	BRUCEL-			NCEPHALIT		l l	EPATITIS			
AREA	MENIN- GITIS	LOSIS	DIPHTHERIA		including cases	Post- Infectious	Serum	Infec	tious	MAL	ARIA
	1969	1969	1969	1969	1968	1969	1969	1969	1968	1969	Cum. 1969
UNITED STATES	46	4	1	14	19	8	133	891	789	40	1,201
ATELL ENGLAND							2.1	(2)	21		10
NEW ENGLAND	-	_	_	_	_	_	31 —	63 1	21	-	40 2
New Hampshire	_	_	[_			_	4	_	_	2
Vermont	_	_	_	_	_	_	_	3	_	_	_
Massachusetts	-	_	-	-	-	_	29	28	11	_	30
Rhode Island*	_	-	-	-	-	-	_	14	2	-	2
Connecticut	-	-	-	-	-	-	2	13	6	-	4
MIDDLE ATLANTIC	4	2	-	5	4	3	38	128	132	9	138
New York City	1	-		1	3	-	24	44	53	-	11
New York, Up-State.	_	2	- ,	1	_	2	6	20	20	-	23
New Jersey	2	-	-	2	1	-	7 1	18	31	5	49
Pennsylvania	1	-		1	-	1	'	46	28	4	55
EAST NORTH CENTRAL	4	_	_ :	5	5	1	6	143	114	5	116
Ohio	1	_	_	3	_	_	_	30	21	1	14
Indiana	2	_	_	_	-		_	15	11	-	7
Illinois	-	_	ļ -	-	4	1	1	25	33	4	63
Michigan	1	-	-	2	-	-	5	68	41	-	31
Wisconsin	-	_	-	_	1	-	-	5	8	-	1
WEST NORTH CENTRAL	1	_	_	_ [2	1	_	32	51	1	82
Minnesota	1	_	_		_	i	_	4	9	<u> </u>	7
Iowa	_	_	_	_	-	_	_	6	6	-	6
Missouri	-	-	-	-	1	-	-	18	21	-	23
North Dakota	-	-	-	-	-		-	1	2	-	2
South Dakota	-	-	-	-	_	-	-	1	_	_	_
Nebraska Kansas	_	_	_	-	_ 1	-	_	2	3 10	1	3 41
Ralisas	_	_	_	-	'	-	-		10	'	41
SOUTH ATLANTIC	7	1	_	2	_	1	9	94	73	9	375
Delaware	-	-	_	_	-	-	-	_	2	-	2
Maryland	1	_	-	-	-	-	5	19	13	1	11
Dist. of Columbia	-	-	_	-	-	-	1	_	-	-	1
Virginia West Virginia	-	_	-	1	-	-	1	9	12 3	-	15
North Carolina	3	_	_	_	_	_	_ 1	6 12	6	6	175
South Carolina*		_	_	_	_	_	_	5	2	ĭ	30
Georgia	- i	1	_	_	_	-	_	16	22		122
Florida	3	-	-	1	-	1	1	27	13	1	19
EAST SOUTH CENTRAL	4	1				,	2	71	4.0		22
Kentucky	1		_	_	_	1 1	2	71 37	42 5	_	32 26
Tennessee	3	1	_				2	21	21		-
Alabama	_	_	_	_	_	_	_	6	4	_	6
Mississippi	-	_	- !	-	-	-	-	7	12	-	-
UDOD COURT COURT	0							7.			
WEST SOUTH CENTRAL	3	-	-	-	3	-	8	74	66	1	34
Arkansas Louisiana	1	_	_	_	3	_	- 6	14	20	1	5 26
Oklahoma	_	_	_	_	-	_	-	7	10	_	3
Texas	2	_	-	-	-	-	2	53	36	-	
MOUNTAIN	6	-	-	-	-	-	1	42	34	5	91
Montana	3	-	-	-	-	-	-	1	8	-	_
Idaho	_	_	_	_	_	_	-	1 _	2	_ [2
Colorado	2	_	_	_	_	_	1	18	14	5	79
New Mexico	_	_	_	_	_	_	<u>.</u>	4	2	_	4
Arizona	1	-	-	_	- '	-	_	9	6	-	1
Utah	-	-	-	-		-	-	9	1	-	1
Nevada	-	-	-	-	-	-	-	-	-	-	4
PAC1FIC	17	_	1	2	5	1	20	244	254	10	293
Washington	10	_		1	1		38	26	256 37	-	293
Oregon	_	_	_		_	_	3	19	16	_	6
California	7	-	1	1	4	1	35	196	203	6	226
Alaska.*					-				-		1
Hawaii	-	-	-	-	-	-	-	3	-	4	55
Puerto Rico	-	-	-	-	-	-	-	16	21	_	1
			1								

^{*}Delayed reports: Hepatitis, infections: Me. 2, S.C. delete 2, Alaska 2 Malaria: R.I. 1

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

JUNE 14, 1969 AND JUNE 15, 1968 (24th WEEK) - CONTINUED

	MEA	SLES (Rube	ola)	MENINGO	COCCAL INF	ECTIONS,	MUMPS	P	OLIOMYELII	TIS	RUBELLA
AREA		Cumu1	ative		Cumu 1	ative		Total	Para	lytic	
	1969	1969	1968	1969	1969	1968	1969	1969	1969	Cum. 1969	1969
UNITED STATES	757	16,642	16,483	48	1,925	1,551	2,182	1	1	3	1,897
							1				
NEW ENGLAND	38	833	959 34	3 _	62 5	80 6	297 16	1 _	1 _	1	170
New Hampshire	2	226	141	1	2	7	10	_	_	_	_
Vermont	-	2	1	_	-	i	3	-	_	-	3
Massachusetts*	11	162	280	-	27	35	113	-	-	-	48
Rhode Island Connecticut	25	10 429	502	2	5 23	7 24	34 131	1	1	1	12 98
MIDDLE ATLANTIC	382	6,142	2,861	11	309	268	252	_	_	_	142
New York City	251	4,187	1,258	5	56	55	171	_	_	_	42
New York, Up-State.	28	507	1,039	2	48	43	NN	-	-	-	29
New Jersey.* Pennsylvania	51 52	711	471 93	2 2	136 69	96 74	81 NN	_	_	_	68
EAST NORTH CENTRAL	82	1,691	3,374	8	257	174	551	_	_	_	541
Ohio	18	284	261	2	90	45	162	-	-	_	41
Indiana*	4	449	592	2	33	21	57	-	-	-	31
Illinois	30 11	337 161	1,264 217	- 4	39 78	39 53	174	_	_	-	141
Wisconsin	19	460	1,040	_	17	16	158	_	_	_	94
WEST NORTH CENTRAL	14	471	332	4	101	78	89	_	_	_	83
Minnesota	1	3	15	4	21	18	45	-	-	-	31
Iowa	12	315	81	-	12	5	14	-	-	-	31
Missouri North Dakota	_	16 7	76 113	_	44_	26 3	4 2	_	_	_	14
South Dakota	-	i i	4	_	1	4	NN	_	_	_	_
Nebraska	1	125	35	-	9	6	24	-	-	-	6
Kansas	_	4	8	-	14	16	-	-	-	-	-
SOUTH ATLANTIC	55	2,143	1,211	5	335	323	230	-	-	_	348
Delaware	23	311	12	-	4	5	6	-	-	-	2
Dist. of Columbiat.	_	32	73 6	_	32 9	22 12	25 1	_	_	_	31
Virginia	-	824	260	-	37	23	44	_	_	_	140
West Virginia	-	159	208	-	14	8	120	-	-	_	123
North Carolina	30	237 102	265 12	1	58 48	65 54	NN 17	_	_	_	2
Georgia	_	1	4	2	59	59	1 '-	_	_	_	_
Florida	2	477	371	2	74	75	17	-	-	-	48
EAST SOUTH CENTRAL	4	87	423	6	119	134	110	_	-		56
Kentucky	3	50	92	2	41	51	46	-	-	-	16
Tennessee	_	15	54 69	3	44 19	46 18	60	_	_	_	40
Mississippi.*	1	21	208	1	15	19		_	_	-	_
WEST SOUTH CENTRAL	126	3,816	4,244	5	267	263	282	_	_	2	122
Arkansas	-	29	2	_	27	15	3	-	-	_	
Louisiana	15	118	2	_	70	71	-	-	-	-	5
Oklahoma Texas	111	125 3,544	106 4,134	1 4	26 144	48 129	11 268	_	_	2	117
MOUNTAIN	22	585	860	1	36	24	116	_	_	_	71
Montana	2	10	57	1	5	2	9	_	_	-	2
Idaho	_	54	16	-	6	10	3	-	-	-	1
Wyoming	_	112	49 436	_	6	7	19	_	_	_	30
New Mexico	3	185	80	_	6		14	_	_	_	5
Arizona	17	220	196	-	9	1	65	-	-	-	30
Utah Nevada	_	3	21 5	_	2 2	1 3	6 -	_	_	_	3 -
PACIFIC	34	874	2,219	5	439	207	255	_	_	_	364
Washington	1	54	507		50	35	49	_	_	_	52
Oregon	3	178	417	-	10	16	5	-	-	_	26
California Alaska*	30	615	1,260 1	5	359 11	144	170	-	-	-	286
Hawaii	-	20	34	_	9	11	31	_	_	_	_
									-		1

^{*}Delayed reports: Measles: Mass. delete 5, N.J. 3, D.C. delete 1, Miss. 1, Alaska 1
Meningococcal infections: Ind. delete 1
Mumps: Me. 2, Alaska 22
Rubella: Me. 1, Alaska 10

TABLE III. CASES OE SPECIEIED NOTIEIABLE DISEASES: UNITED STATFS EOR WEEKS ENDED

JUNE 14, 1969 AND JUNE 15, 1968 (24th WEEK) - CONTINUED

AREA	STREPTOCOCCAL SORE THROAT & TETANUS SCARLET FEVER		TULA	TULAREMIA TYPHOI FEVER			TYPHU TICK (Rky. Mt	RABIES IN ANIMALS			
*******	1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969
UNITEO STATES	6,547	2	52	8	68	5	127	27	120	62	1,758
NEW ENGLAND	1,172	-	_	6	14	1	3	_	_	_	7
Maine.*	22	-	-	-	-	-	1	_	-	-	4
New Hampshire Vermont	13 15	_	-	-	-	-	_	_	-	-	-
Massachusetts.*	163	_	_	6	14	1	2	_		_	1
Rhode Island	67	_	_	_	_	_	_	_	_	_	
Connecticut	892	-	-	-	-	-	-	-	-	-	1
MIOOLE ATLANTIC	511	1	9	-	2	1	13	5	10	2	57
New York City	38	_	5	-	1	-	6	_	_		
New York, Up-State. New Jersey	410 NN	_	2	_	1 _	-	4	3	3	2	54
Pennsylvania	63	1	i	_	_	1	3	2	7	_	3
EAST NORTH CENTRAL	627	_	7	_	4	2	13	_	_	6	111
Ohio. *	131	_	_	_		1	7	_	_	_	30
Indiana	117	-	-		1	-	-	-	-	2	32
Illinois	128	-	5	-	2	-	2	-	-	2	21
Michigan	192 59	_	2	_	1	1	4	_	_	1	3 25
WEST NORTH CENTRAL	196	1	3	1	7	-	4	-	1	13	316
Minnesota	3 41	_	-		_	_	1 _	_	_	3 2	79 43
Missouri	-	_	_	1	4	_	2	_	_	2	96
North Oakota	62	-		- '	-	_	_	_	- :	2	41
South Oakota	14	-	- 1	-	-	-	-	-	1	-	13
Nebraska	74	- 1	- 2	-		-	1	-	- :	-	10
Kansas	2	'	3	_	3	_	-	-	-	4	34
SOUTH ATLANTIC	718	-	10	-	17	-	21	13	60	12	503
Oelaware	3 83	-	-	-	-	-	1	-	- 10	-	-
Oist. of Columbia	0.5	_	2	_		_	3	3	18	_	_
Virginia	345	_		_	1	-	_	5	16	6	260
West Virginia	136	-	1	-	2	-	1	-	3	1	79
North Carolina	10 42	-	1	-	5	-	4	5	20	-	4
South Carolina Georgia	5	-	1 _	_	2 3	_	7	_	3 _	1	44
Florida	94	-	5	_	4	-	3	_	_	4	116
EAST SOUTH CENTRAL	990	_	4	_	8		12	8	25	15	289
Kentucky	112	_	2	-	_	_	2	4	5	4	155
Tennessee	763	-	2	-	7	-	8	4	19	9	102
Alabama	55 60	_	_	-	_ 1	-	2	_	1	2	32
ritsorsorppr	00		_	_	'	_	2	_	_	-	-
WEST SOUTH CENTRAL	505	-	13	1	9	-	17	-	14	11	238
Arkansas	4	_	5	1	1 1	_	8	_	3	1 2	18 15
Oklahoma	24		1		5	_	_	_	8	_	37
Texas	477	-	7	-	2	_	9	-	3	8	168
MOUNTAIN	1,445	_	_	_	7	1	18	1	7	1	76
Montana	31	-	-	-		_	_	_	_		-
Idaho	63	-	-	-	_	1 .	2	-	1	-	_
Wyoming* Colorado	1,024	_	_	_	2	-	5 2	_ 1		1	41
New Mexico	108	_	_	_	1	_	5	_	6	_	3 8
Arizona	102	-	_	_		_	3	_	_	_	19
Utah Nevada	115		_	_	4 _	-	'	-	-	_	2 3
PACIFIC	383 315	_	6	_	_	_	26 1	_	3 2	2	161
Oregon	68	-	-	_	_	_	6	_	_	_	_
California		-	5	-	_	-	19	-	1	2	161
Alaska*	-	_	_		-		-		-		-
	_	_	_	-	-	-		-	-		
Puerto Rico	-	-	2	_	_	_	3	_	-	1	16

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED JUNE 14, 1969 Week No.

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(By place of occurrence and week of filing certificate. Excludes fetal deaths)

	All Ca	uses	Pneumonia	Under		All Ca	uses	Pneumonia	Unde
Area	A11	65 years	and	l year	Area	A11	65 years	and	l yea
	Ages	and over	Influenza All Ages	All Causes		Ages	and over	Influenza All Ages	All Cause
FEW ENGLAND:	672	423	33	30	SOUTH ATLANTIC:	1,138	601	37	61
Boston, Mass	209	125	5	11	Atlanta, Ca	109	49	i	9
Bridgeport, Conn	35	20	4	3	Baltimore, Md	229	119	3	14
Cambridge, Mass	25	16	7	2	Charlotte, N. C	36	17	-	5
Fall River, Mass	35	22	2	-	Jacksonville, Fla	78	44	1	3
Hartford, Conn	52	27	-	1	Miami, Fla	101	56	-	4
Lowell, Mass	26	21	1	_	Norfolk, Va	64	26	3	3
Lynn, Mass	16	11	2	1	Richmond, Va	84	44	3	2
New Bedford, Mass New Haven, Conn	37 45	25 24	1	1	Savannah, Ca	33 77	18 60	3 6	
Providence, R. I	51	34	i	6	Tampa, Fla	86	45	7	2
Somerville, Mass	13	11		1 1	Washington, D. C	197	98	9	10
Springfield, Mass	43	29	6	2	Wilmington, Del	44	25	1	5
Waterbury, Conn	30	21	_	- 1					
Worcester, Mass	55	37	4	2	EAST SOUTH CENTRAL:	661	356	27	39
					Birmingham, Ala	95	45	-	€
IDDLE ATLANTIC:	3,386	1,929	137	156	Chattanooga, Tenn	52	29	5	1
Allantorm Ba	36	17	7	3	Knoxville, Tenn	45	29	2	1
Allentown, Pa Buffalo, N. Y	42 151	26 89	7 5	_ 5	Louisville, Ky Memphis, Tenn	150	86	15	5
Camden, N. J	37	19	1	1	Mobile, Ala	122 47	63 25	2	12
Elizabeth, N. J	28	20	1		Montgomery, Ala	41	19	1	
Erie, Pa	55	33	4	1	Nashville, Tenn	109	60	1 1	7
Jersey City, N. J.*	71	41	5	4					
Newark, N. J	62	27	2	5	WEST SOUTH CENTRAL:	1,170	599	39	72
New York City, N. Y	1,727	979	69	73	Austin, Tex	24	15	1	-
Paterson, N. J	33	17	3	5	Baton Rouge, La	47	25	-	4
Philadelphia, Pa	502	265	10	38	Corpus Christi, Tex	28	14	_	
Pittsburgh, Pa	188	96	13	13	Dallas, Tex	158	81	3	11
Reading, Pa	54	43	3		El Paso, Tex	50	25	6	4
Rochester, N. Y	125	78	2	4	Fort Worth, Tex Houston, Tex	66 223	39	7	1 8
Schenectady, N. Y Scranton, Pa	31	20 25	5 2	1	Little Rock, Ark	65	110	6	2
Syracuse, N. Y	36 72	48	_	_	New Orleans, La	182	86	2	17
Trenton, N. J	65	40	3	2	Oklahoma City, Okla	87	41	1	1 3
Utica, N. Y	38	26	1	1	San Antonio, Tex	122	56	i	13
Yonkers, N. Y	33	20	i i		Shreveport, La	50	24	3	4
ŕ				}	Tulsa, Okla	68	45	7	4
AST NORTH CENTRAL:	2,577	1,433	78	107					
Akron, Ohio	75	43		1	MOUNTAIN:	468	233	20	34
Canton, Ohio	48	25	1	1	Albuquerque, N. Mex	47	22	5	3
Chicago, Ill	668	375	22	23	Colorado Springs, Colo.	28	12	4	5
Cincinnati, Ohio	168	102	3	13	Denver, Colo	122	68	3	12
Cleveland, Ohio Columbus, Ohio	227	108	2	12	Ogden, Utah Phoenix, Ariz	18	10	1 2	5
Dayten, Ohio	124 79	60 44	5	3	Pueblo, Colo	107 27	16		3
Detroit, Mich	354	186	9	14	Salt Lake City, Utah	55	33	3	3
Evansville, Ind	32	25	4	'-	Tucson, Ariz	64	26	2	3
Flint, Mich	57	24	3	6					
Fort Wayne, Ind	49	32	2	3	PACIFIC:	1,647	982	34	66
Cary, Ind	35	18	3	4	Berkeley, Calif	24	19	2	-
Grand Rapids, Mich	45	26	4	2	Fresno, Calif		23	4	3
Indianapolis, Ind	158	74	2	11	Glendale, Calif		22	1	2
Madison, Wis	26	16	5	1	Honolulu, Hawaii	41	22	-	-
Milwaukee, Wis	137	90	-	3	Long Beach, Calif	95	60	2	3
Peoria, Ill	51	30	-	2	Los Angeles, Calif Oakland, Calif	500	288	6	17
Rockford, Ill	36 49	19	2	- 2	Pasadena, Calif	93	56	1	1 2
South Bend, Ind. Toledo, Ohio	105	29 70	6 2	2	Portland, Oreg	176	113	3	2
Youngstown, Ohio	54	37	2	2	Sacramento, Calif	67	38	1	
Targettin, onto	54	31		-	San Diego, Calif	93	49	2	
EST NORTH CENTRAL:	881	554	23	52	San Francisco, Calif	171	91	4	7
Des Moines, Iowa	67	41	1	4	San Jose, Calif	60	38	5	1
Duluth, Minn	18	12	_	1	Seattle, Wash	146	84	1] 3
Kansas City, Kans	56	30	3	5	Spokane, Wash	45	34	2	1 :
Kansas City, Mo	1 30	82	-	5	Tacoma, Wash	34	21	_	1
Lincoln, Nebr	31	23	1	1					
Minneapolis, Minn	115	77	2	5	Total	12,600	7,110	428	617
Omaha, Nebr	84	56	2	5		mulative T	otals		
St. Louis, Mo	263	156	8	22	I I			previous w	eke
St. Paul, Minn	65	47	2	3	including report	ed correct	TOUS TOU	previous we	CKS
Wichita, Kans	52	30	4	1	All Causes, All Ages			325.93	5
					All Causes, Age 65 and				
					Pneumonia and Influenza	. All Ages		17.29	6

3 1262 08863 5817

EPIDEMIOLOGIC NOTES AND REPORTS CASE OF ANTHRAX — New Jersey

On March 19, 1969. a 45-year-old worker in a factory in Camden, New Jersey, was examined by a physician for a swollen infected lesion above his left eye. The patient was hospitalized. Exudate from the lesion was cultured and *Bacillus anthracis* was isolated. Antibiotic therapy was initiated and continued for 2 weeks until the man recovered.

The man worked at a factory that produces gelatin and calcium phosphate from hides and bone. The hasic raw material is bone, ground into pieces or chips about 1 inch in diameter, purchased from India and South America. The material is imported in burlap bags. The patient worked for periods of 2 to 3 weeks when shipments were received, emptying these bags into a large storage area. The operation is excessively dusty, and the patient probably became infected by contact with dust harboring the *B. anthracis* organisms.

Another single case of anthrax was reported from this company in 1965 (MMWR, Vol. 14, No. 35). This employee. a 29-year-old man, had a lesion on his right knee. His job brought him into contact with the empty burlap hags used in shipment of the imported hones. In association with this previous case, an environmental sampling program was conducted in 1965 at this plant which revealed that 17 of 20 bone samples, three of three dust samples, and seven of 14 air samples were positive for B. anthracis. Additionally, in 1965, 17 production line samples were obtained and two were positive for B. anthracis. Both positive samples were hone that had been bathed in a 2 percent NaOH solution, the first stage in processing the bone. The subsequent processing stages, including prolonged contact with acid and heat, should destroy all B. anthracis organisms.

(Reported by Ronald Altman, M.D., Director, and Howard Rosenfeld, V.M.D., Divisian of Preventable Diseases, and E. Lynn Schall, Chief, Occupational Health Pragram, New Jersey State Department of Health.)

Editoriol Comment:

Of 202 anthrax cases reported to NCDC since 1955, this is only the third case associated with bone; two of these three were from this company. The third case was in a stevedore in Philadelphia who became infected while unloading bags of imported bones.

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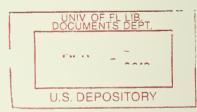
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NATIONAL COMMUNICABLE DISEASE CENTER ATTN: THE EDITOR MORBIDITY AND MORTALITY WEEKLY REPORT ATLANTA, GEORGIA 30333

NOTE: THE DATA IN THIS REPORT ARE PROVISIONAL AND ARE BASED ON WEEKLY TELEGRAMS TO THE NOTE BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES AT CLOSE OF BUSINESS ON FRIDAY; COMPILED DATA ON A NATIONAL BASIS ARE OFFICIALLY RELEASED TO THE PUBLIC ON THE SUCCEEDING FRIDAY.

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